

# **REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/617,059
Filing Date	7/9/2003
First Named Inventor	Shane Atwell
Art Unit	1636
Examiner Name	Vogel, Nancy S.
Attorney Docket Number	022132-000510US

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ all the attorneys/agents associated with Customer Number 20350

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: At the request of the client, SGX Pharmaceuticals, Inc.

## **CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:
- ☐ The address associated with Customer Number:

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Wilson Sonsini Goodrich & Rosati		
Address	12235 El Camino Real, Suite 200		
City	San Diego	State	CA Zip 92130
Country	US		
Telephone	(858) 350-2300	Email	
Signature	<i>Karen Babayak Dowd</i>		
Name	Karen B. Dow	Registration No.	29,684
Date	March 10, 2008	Telephone No.	858-350-6100

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.